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Bib Data Sheet

CONFIRMATION NO. 6499

<b>SERIAL NUMBER</b> 09/207,224	<b>FILING DATE</b> 12/08/1998 <b>RULE</b>	<b>CLASS</b> 345	<b>GROUP ART UNIT</b> 2611	<b>ATTORNEY DOCKET NO.</b> 28049/34693	
<b>APPLICANTS</b> WILLIAM A. FEININGER, PALM HARBOR, FL; DAOZHENG LU, DUNEDIN, FL;					
<b>** CONTINUING DATA *****</b> <i>ML</i>					
<b>** FOREIGN APPLICATIONS *****</b> <i>ML</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <i>ML</i> <b>** 01/11/1999</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowance</i> Verified and <i>ML</i> Acknowledged <i>ML</i>		<b>STATE OR COUNTRY</b> FL	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 83	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 27160					
<b>TITLE</b> METERING VIEWING OF VIDEO DISPLAYED IN WINDOWS					
<b>FILING FEE RECEIVED</b> 1972	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/207,224	12/08/98	348	2711	28049/34693

APPLICANT WILLIAM A. FEININGER, PALM HARBOR, FL; DAOZHENG LU, DUNEDIN, FL.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
VERIFIED

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
VERIFIED

FOREIGN FILING LICENSE GRANTED 01/11/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY FL	SHEETS DRAWING 8	TOTAL CLAIMS 83	INDEPENDENT CLAIMS 4
Verified and Acknowledged Examiner's Initials _____ Initials _____					

ADDRESS  
TREVOR B JOIKE  
MARSHALL O'TOOLE GERSTEIN MURRAY  
AND BORUN  
6300 SEARS TOWER 233 SOUTH WACKER DRIVE  
CHICAGO IL 60606-6402

TITLE  
METERING VIEWING OF VIDEO DISPLAYED IN WINDOWS

FILING FEE RECEIVED  \$1,972	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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